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FORM D

**PROCESSED** 

JUL 3 1 2008

THOMSON REUTERS

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

# FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL					
OMB Number:	3235-0076				
Expires:					
Estimated average burden					
hours per respons	se 16.00				

SEC	USE OF	NLY					
Prefix		Serial					
DATE RECEIVED							

Name of Offering ( check if this is an amendment and name has changed, and indicate change.)	
Compass Holdings, Ltd.: Offering of Capital Stock	5,6 3,4
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	ULOE Will F-3
A BACIO INDUTEDIO ATION DATA	<u> </u>
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)	Washington, DC
Compass Holdings, Ltd.	1) Ches
Address of Executive Offices (Number and Street, City, State, Zip Code) c/o Citco Fund Services (Curacao) N.V., Kaya Flamboyan 9, P.O. Box 4774, Willemstad, Curacao, Netherlands, Aptilles	Telephone Number (Including Area Code) 599-9-732-2222
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
(if different from Executive Offices)	
same as executive offices	I IPENI SEISI IPM SEISI PNA BIIBE INPA MISE BII
Brief Description of Business  Securities Investment	
Type of Business Organization	08056335
	please specify):
business trust limited partnership, to be formed British	Virgin Islands International Business Company
Actual or Estimated Date of Incorporation or Organization:    Month   Year	nated:

## GENERAL INSTRUCTIONS

### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

### State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

## - ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA	
2. Enter the information requested for the following:	
Each promoter of the issuer, if the issuer has been organized within the past five years;	
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the	e issuer.
Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and	
Each general and managing partner of partnership issuers.	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner	
Full Name (Last name first, if individual)	
Tsimbinos, Steven J.	
Business or Residence Address (Number and Street, City, State, Zip Code) 12 Linden Place, 2nd Floor, Red Bank, New Jersey 07701	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner	
Full Name (Last name first, if individual)	
Lawrie Limited	
Business or Residence Address (Number and Street, City, State, Zip Code)	
c/o Harney Westwood & Riegels, Craigmuir Chambers, PO Box 71, Road Town, Tortola, British Virgin Islands, VG1110	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or  Managing Partner	
Full Name (Last name first, if individual) Westlaw Limited	-
Business or Residence Address (Number and Street, City, State, Zip Code)	
c/o Harney Westwood & Riegels, Craigmuir Chambers, PO Box 71, Road Town, Tortola, British Virgin Islands, VG1110	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or	
Managing Partner	
Full Name (Last name first, if individual)	
Full Manie (Last halite tilst, it morridaar)	
Business or Residence Address (Number and Street, City, State, Zip Code)	<del></del>
Business of Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner	
Managing Futiles	
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
·	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or	
Managing Partner	
Full Name (Last name first, if individual)	<del></del>
full leathe (Last name this, it individual)	
De la contraction de la contra	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner	
ivianagnig ratulei	
Full Name (Last name first, if individual)	·
Business or Residence Address (Number and Street, City, State, Zip Code)	

B. INFORMATION ABOUT OFFERING												
1 Has the	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?										Yes	No [7]
i. ilas me	133401 3014	, 01 4063 11			Appendix,				_			ŭ
2. What is	the minim	ım investn			pted from a		-				\$ <sup>5,00</sup>	0,000.00*
					ss than the						Yes	No
											Ø	
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.												
Full Name (I	ast name i	irst, if indi	ividual)			<u>.                                    </u>	****					
Business or !	Residence	Address (N	lumber and	Street, Ci	ty, State, Z	ip Code)						
Name of Ass	ociated Br	oker or De	aler									
States in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit l	Purchasers						
(Check	"All States	" or check	individual	States)		1	····	••••••	•••••		☐ Al	l States
AL	AK	AZ	AR	CA	CO	CT	DE	DC]	FL	GA	HI	ID
IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
MT RI	NE SC	NV SD	NH TN	TX	NM UT	NY VT	NC VA	ND WA	OH WV	OK WI	OR WY	PA PR
Full Name (1	_ast name :	first, if ind	ividual)									
Business or	Residence	Address (1	Number an	d Street, C	City, State,	Zip Code)						
Name of Ass	ociated Br	oker or De	aler									
States in Wh	ich Person	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers						
(Check	"All States	" or check	individual								☐ Al	l States
AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA)	HI	[D]
IL	IN	IA	KS	KY	LA	ME	MD	MAI	MI	MN	MS	MO
MT RI	NE SC	NV SD	NH TN	NJ TX	UT]	NY VT	NC VA	ND WA	OH WV	OK WI	OR WY	PA PR
Full Name (												
Business or	Residence	Address (1	Number an	d Street, C	City, State,	Zip Code)						
Name of Ass	sociated Br	oker or De	aler									
States in Wh	ich Person	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers						
(Check	"All States	" or check	individual	States)				*************	•		□ Al	l States
AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
IL MT	IN NE	ĪĀ NV	KS NH	KY NJ	LA NM	ME NY	MD NC	MA ND	MI OH	MN OK	MS OR	MO PA
RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box \( \) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	s 0.00	s <sup>0.00</sup>
	Equity		\$ 0.00
	Common Preferred		
	Convertible Securities (including warrants)	\$ 0.00	\$ 0.00
	Partnership Interests		s N/A
	Other (Specify Capital Stock		·
	Total	\$ 1,000,000,000.00	673,062,494.00
	Answer also in Appendix, Column 3, if filing under ULOE.	<u> </u>	<u> </u>
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	<u>59</u>	\$_673,062,494.00
	Non-accredited Investors		\$_0.00
	Total (for filings under Rule 504 only)	N/A	\$ <u>N/A</u>
3.	Answer also in Appendix, Column 4, if filing under ULOE.  If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505	N/A	s N/A
	Regulation A	N/A	s N/A
	Rule 504	N/A	N/A
		N/A	s
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	<del></del> ;	•
	Transfer Agent's Fees		\$_ <sup>0.00</sup>
	Printing and Engraving Costs		s 0.00
	Legal Fees		\$_25,000.00
	Accounting Fees		s
	Engineering Fees	<b>.</b>	\$ 0.00
	Sales Commissions (specify finders' fees separately)		\$ 0.00
	Other Expenses (identify) Misc. Operating Expenses		\$_5,000.00
	Total		\$_30,000.00

		EXPENSES AND US	

	b. Enter the difference between the aggregate offeri and total expenses furnished in response to Part C — of proceeds to the issuer."	Question 4.a. This difference is the "adjusted gr	oss	\$_999,970,000.00
5.	Indicate below the amount of the adjusted gross pro each of the purposes shown. If the amount for any check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part	y purpose is not known, furnish an estimate a the payments listed must equal the adjusted gr	ind	
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees			<u>20.00</u> \$ <u>0.00</u>
	Purchase of real estate		☑ \$ <u>0.00</u>	<b>□</b> \$ 0.00
	Purchase, rental or leasing and installation of mach and equipment	hinery	🗗 \$ 0.00	Ø \$ 0.00
	Construction or leasing of plant buildings and faci			<b>₹</b> \$ 0.00
	Acquisition of other businesses (including the value offering that may be used in exchange for the asset issuer pursuant to a merger)	ts or securities of another	🗸 \$ <u>0.00</u>	<b> 2 3 0 . . . . . . . . . .</b>
	Repayment of indebtedness		🔽 \$_0.00	∇ \$ 0.00
	Working capital		🗸 \$ <u>0.00</u>	<b>2</b> \$ 999,970,000.00
	Other (specify):			<b>∑</b> \$ 0.00
	•		 🔽 \$_0.00	\$ 0.00
	Column Totals		🗹 \$_0.00	<u>999,970,000.00</u>
	Total Payments Listed (column totals added)		🔽 \$ <u>99</u>	99,970,000.00
		D. FEDERAL SIGNATURE		
sig	issuer has duly caused this notice to be signed by the lature constitutes an undertaking by the issuer to furnished by the issuer to any non-acci	nish to the U.S. Securities and Exchange Com	mission, upon writt	ule 505, the following en request of its staff,
Iss	er (Print or Type)	Signature + 01	Date /	. 0
Co	mpass Holdings, Ltd.	su /sili	1/3/0	) 8
Na	ne of Signer (Print or Type)	Title of Signer (Print or Type)	, ,	
Ste	en J. Tsimbinos	Director		

# - ATTENTION ---

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE										
1.		62 presently subject to any of the disqualification	Yes	No							
		See Appendix, Column 5, for state response.									
2.	The undersigned issuer hereby undertake D (17 CFR 239.500) at such times as re	es to furnish to any state administrator of any state in which this notice is f equired by state law.	iled a no	tice on Form							
3.	The undersigned issuer hereby undertak issuer to offerees.	ces to furnish to the state administrators, upon written request, informat	ion furn	ished by the							
4.	limited Offering Exemption (ULOE) of	the issuer is familiar with the conditions that must be satisfied to be ent the state in which this notice is filed and understands that the issuer claim ablishing that these conditions have been satisfied.									
	ter has read this notification and knows the thorized person.	contents to be true and has duly caused this notice to be signed on its beha	lf by the	undersigned							
Issuer (	Print or Type)	Signature Date									
Compa	ss Holdings, Ltd.	Stay / Sul- 7/3/00	y	•							
Name (	Print or Type)	Title (Print or Type)									

Director

### Instruction:

Steven J. Tsimbinos

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				AI	PPENDIX		· · · · · · · · · · · · · · · · · · ·			
1	Intend to non-a investor	2 I to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)					5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No	Capital Stock	Number of Accredited Investors	Number of Number of Non-Accredited				No	
AL										
AK										
AZ										
AR										
CA		✓	\$1,000,000,000.00	1	\$500,000.00				✓	
СО							•			
СТ		✓	\$1,000,000,000.00	3	\$14,150,000.00				✓	
DE										
DC										
FL										
GA										
Hl										
ID										
ΙL		✓	\$1,000,000,000.00	17	\$157,700,000.00				✓	
IN	,,, · · · · · · · · · · · · · · · · · ·									
IA		<b>✓</b>	\$1,000,000,000.00	0	\$0.00				1	
KS										
KY		✓	\$1,000,000,000.00	0	\$0.00	·			1	
LA										
ME						•				
MD		<b>✓</b>	\$1,000,000,000.00	0	\$0.00				✓	
MA		1	\$1,000,000,000.00	1	\$540,000.00				✓	
Ml										
MN										
MS										

### APPENDIX 2 3 4 5 Disqualification Type of security under State ULOE Intend to sell and aggregate (if yes, attach offering price Type of investor and explanation of to non-accredited investors in State offered in state amount purchased in State waiver granted) (Part E-Item 1) (Part C-Item 1) (Part C-Item 2) (Part B-Item 1) Number of Number of Accredited Non-Accredited Capital Stock State Yes No Investors Investors Yes No Amount Amount MO MT NE NV NH NJ \$1,000,000,000.00 \$38,550,000.00 NM \$1,000,000,000.00 NY \$459,122,494.00 NC ND ОН OK OR PA RΙ SC SD TN TX \$1,000,000,000.00 \$1,500,000.00 UΤ VT VA WA wv \$1,000,000.00 WI \$1,000,000,000.00

				APP	ENDIX	,			
1		2	3			4		5 Disqual	lification
	to non-a	d to sell accredited as in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and explanat amount purchased in State (Part C-Item 2)			attach attion of granted)	
State	Yes	No	Capital Stock	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
WY									
PR									

END